## **Application Data Sheet**

## **Application Information**

Application number::	<u>10/519,756</u>
Filing Date::	12/30/04
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	
Title::	Viral Inhibitors
Attorney Docket Number::	50304/054001
Request of Early Publication?::	No
Request of Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	

Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Belgium
Status::	Full Capacity
Given Name::	Johan
Middle Name::	
Family Name::	Neyts
Name Suffix::	
City of Residence::	Kessel-Lo
State or Province of Residence::	
Country of Residence::	Belgium
Street of mailing address::	Heidebergstraat 278
City of mailing address::	Kessel-Lo
State or Province of mailing address::	
Country of mailing address::	Belgium
Postal or Zip Code of mailing address::	B-3010
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Austria
Status::	Full Capacity
Given Name::	Gerhard

Pürstinger

Middle Name::

Family Name::

Innsbruck City of Residence:: State or Province of Residence:: Austria Country of Residence:: Roseggerstrasse 12 Badhausstrasse 10/4 Street of mailing address:: Innsbruck Igls City of mailing address:: State or Province of mailing address:: Austria Country of mailing address:: Postal or Zip Code of mailing address:: A-6020 A6080 Applicant Authority Type:: Inventor Primary Citizenship Country:: Belgium Full Capacity Status:: Erik Given Name:: Middle Name:: De Clercq Family Name:: Name Suffix:: Lovenjoel City of Residence:: State or Province of Residence:: Belgium Country of Residence:: Parklaan 9 Street of mailing address:: City of mailing address:: Lovenjoel State or Province of mailing address:: Country of mailing address:: Belgium Postal or Zip Code of mailing address:: B-3010

Name Suffix::

**Correspondence Information** 

Correspondence Customer Number::

21559

Representative Information

Representative Customer Number::

21559

**Domestic Priority Information** 

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This Application

National stage of

PCT/BE2003/000117

07/03/03

Foreign Priority Information

Country::

Application Number::

Filing Date::

Priority Claimed::

GB

0313251.1

06/10/03

Yes

GB

0215293.2

07/03/02

Yes

**Assignee Information** 

Assignee name::

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